



The Expanding Role of Laboratory Medicine in Care Transformation

As healthcare leaders across the world respond to significant changes, they're exploring opportunities to improve outcomes and lower costs. Given its significance in clinical pathways, the core laboratory can play a significant role in these care transformation efforts. Modern Healthcare Custom Media sat down to discuss insights on the valued role of laboratory medicine with Maurizio Ferrari, president of the International Federation of Clinical Chemistry and Laboratory Medicine, and Ian Young, president of the U.K.'s Association for Clinical Biochemistry and Laboratory Medicine. Both served as partners with Abbott and other leading global healthcare organizations in the first annual UNIVANTS of Healthcare Excellence award program earlier this year. The program recognizes teams that have collaborated across disciplines, including the core laboratory, to drive care transformation.

The UNIVANTS of Healthcare Excellence program received a significant amount of applications from the Middle East and Europe. Do you find that labs are a target of health system innovation in these regions as compared to others? Why might that be?

IY: There are differences in how healthcare systems are configured across the world, which can lead to differences in how labs relate to healthcare systems. In the U.K., our labs are assets of a hospital or health system and fully integrated, so they are not paid per test. So, the approach of the lab staff may be broader in terms of not looking to drive the success or income of the lab, but rather looking to innovate in the interests of the organization as a whole. Another difference in the U.K. is that many labs are led by clinicians who have a split practice: the clinicians are based in labs, but they also see patients by both referrals and through outpatient clinical services. This may mean they naturally work more closely with clinical teams, which may make it easier to innovate.

MF: UNIVANTS winners engaged in a team activity. It is possible that in some areas of the world, leaders are more comfortable working individually in comparison with other regions. There is no indication that the core operations of what labs do is different from one place to another, however, there are different rules, capabilities and constituencies.



From left to right: Maurizio Ferrari, president of the International Federation of Clinical Chemistry and Laboratory Medicine, and Ian Young, president of the U.K.'s Association for Clinical Biochemistry and Laboratory Medicine.

Lab medicine can be an under-recognized service; Why do you believe providers should invest further in labs?

IY: Lab tests are critical to determining many patient pathways. Administrators are interested in delivering outcomes as efficiently as possible. There are many studies that show that investing in laboratory services and improving key pathways in collaboration with clinicians will deliver services more efficiently, reduce patient stay, avoid unnecessary investigations and improve patient care.

MF: Lab medicine is always changing and collaboration between clinicians and laboratorians must increase. The ability of administrators to drive innovation in this area will vary between countries, but laboratorians should take the lead in making administrators aware of the value of the laboratory in improving the system, improving patient outcomes and reducing cost.

How are laboratory leaders playing a role as providers adapt to changing reimbursement paradigms across the world?

IY: There is an increasing focus on the impact of spending on outcomes, and that applies to diagnostics more than anywhere else. Laboratory professionals are uniquely expected to understand the value of the tests that they offer, in order to suggest what tests will best answer clinical questions, but also to point out where tests are unlikely to be useful, which can help us avoid false positives and unnecessary costs. In the U.K., we're increasingly interested in physicians asking questions rather than requesting specific tests, so that the laboratory can provide guidance, while also maximizing the impact of those tests through downstream action.

MF: Reimbursement is decreasing in many regions. Usually, the capability of laboratorians to influence reimbursement isn't strong. We try to provide administrators with information about the cost of laboratory services, but in countries with socialized medicine, it's the economic decision of the government that is the ultimate driver. Our goal is to offer clear data regarding the utility of the test, the cost of the test and how this test may influence outcomes and overall clinical costs, so that leaders can make an informed decision.

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